

# United States Court of Appeals For the First Circuit

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No. 06-1384

RAUL P. GONSALVES

Petitioner - Appellant

v.

MICHAEL A. THOMPSON, Superintendent, MCI Shirley

Respondent - Appellee

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**ORDER OF COURT**  
**Pursuant to 1<sup>st</sup> Cir. R. 27(d)**  
**Entered: June 16, 2006**

Treating appellant's financial affidavit, with attached prison trust account statement, as a motion to proceed on appeal in forma pauperis ("IFP"), we transmit said request to the district court for action in the first instance pursuant to Fed. R. App. P. 24(a)(1). Copies of the district court's ruling shall be forwarded to this court. The district court, if it denies the motion, is requested to state its reasons in writing. Fed. R. App. P. 24(a)(2). If appellant is not granted IFP status by the district court, he may file a motion to proceed IFP in this court, provided that he do so in accordance with Fed. R. App. P. 24(a)(5).

**CERTIFIED COPY**

WE HEREBY CERTIFY THIS DOCUMENT  
IS A TRUE AND CORRECT COPY OF  
THE ORIGINAL ON FILE IN MY OFFICE  
AND IN MY LEGAL CUSTODY.

FIRST CIRCUIT COURT OF APPEALS  
BOSTON, MA

By: 

Date: 

By the Court:

Richard Cushing Donovan, Clerk

By: 

Margaret Carter, Chief Deputy Clerk

[Certified copies: Hon. Reginald C. Lindsay and Sarah Thornton, USDC Clerk]

[cc: Raul P. Gonsalves and Eva M. Badway, AAG]

mc

Office of The Clerk  
United States Court of Appeals  
For The First Circuit  
1 Courthouse Way, Suite 2500  
Boston, MA 02210

6-13-06

2006 JUN 15 A 11:25

**COPY**  
**CAP**

RE: Gonsalves v. Thompson, No. 06-1384

**PRO SE**

Dear Clerk,

Enclosed please find for filing in the above reference matter an Application to Appeal in Forma Pauperis.

Please file these documents and advise me of any decision in this matter.

Your time and assistance is very greatly appreciated.

Sincerely,  
Raul Gonsalves  
Raul P. Gonsalves #42960  
PCCF  
26 Long Pond Rd.  
Plymouth, MA 02360

**Affidavit to Accompany  
Motion for Leave to Appeal in Forma Pauperis**

2006 JUN 15 A 11:25

District Court No. 05-10618-RCL  
Appeal No. 06-1384

U.S. District Court

PRO 35

Gonsalves

v.

Thompson

**Affidavit in Support of Motion**

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Signed: Raul Gonsalves**Instructions**

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: 6-13-06

My issues on appeal are: My case in District Court should be reopened pursuant to Rule 60(b) because I never received the Judges order of 10/24/05 and therefore could not respond within the 30 days.

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Self-employment	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Gifts	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Alimony	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Child support	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Public assistance (such as welfare)	\$ <u>none</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Other (specify): <u>See #12</u>	\$ <u>(pg. 5)</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>
Total Monthly income:	\$ <u>varies</u>	\$ <u>N/A</u>	\$ <u>none</u>	\$ <u>N/A</u>

2. List your employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions)

Employer	Address	Dates of Employment	Gross monthly pay
<u>none</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

3. List your spouses's employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions)

Employer	Address	Dates of Employment	Gross monthly pay
<u>none</u>	<u>(no spouse)</u>	<u>none</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>none</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>none</u>	<u>N/A</u>

4. How much cash do you and your spouse have? \$ 114.06

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial Institution	Type of Account	Amount you have	Amount your spouse has
<u>Inmate Account</u>		\$ <u>114.06</u>	\$ <u>NONE</u>
<u>none</u>	<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>none</u>	<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you or your spouse owns. Do not list clothing and ordinary household furnishings.

Home	(Value)	Other real estate	(Value)	Motor Vehicle #1	(Value)
<u>none</u>		<u>none</u>		Make & year: <u>none</u>	
<u>none</u>		<u>none</u>		Model: <u>none</u>	
<u>none</u>		<u>none</u>		Registration#: <u>none</u>	
Motor Vehicle #2	(Value)	Other assets	(Value)	Other assets	(Value)
Make & year: <u>none</u>		<u>none</u>		<u>none</u>	
Model: <u>none</u>		<u>none</u>		<u>none</u>	
Registration#: <u>none</u>		<u>none</u>		<u>none</u>	

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
<u>none</u>	<u>none</u>	<u>none</u>
<u>none</u>	<u>none</u>	<u>none</u>
<u>none</u>	<u>none</u>	<u>none</u>

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
<u>none</u>	<u>N/A</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>N/A</u>

4. How much cash do you and your spouse have? \$ 114.06

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial Institution	Type of Account	Amount you have	Amount your spouse has
<u>Instate Account</u>		\$ <u>114.06</u>	\$ <u>none</u>
<u>none</u>	<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>none</u>	<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you or your spouse owns. Do not list clothing and ordinary household furnishings.

Home	(Value)	Other real estate	(Value)	Motor Vehicle #1	(Value)
<u>none</u>		<u>none</u>		Make & year: <u>none</u>	
<u>none</u>		<u>none</u>		Model: <u>none</u>	
<u>none</u>		<u>none</u>		Registration#: <u>none</u>	
Motor Vehicle #2	(Value)	Other assets	(Value)	Other assets	(Value)
Make & year: <u>none</u>		<u>none</u>		<u>none</u>	
Model: <u>none</u>		<u>none</u>		<u>none</u>	
Registration#: <u>none</u>		<u>none</u>		<u>none</u>	

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
<u>none</u>	<u>none</u>	<u>none</u>
<u>none</u>	<u>none</u>	<u>none</u>
<u>none</u>	<u>none</u>	<u>none</u>

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
<u>none</u>	<u>N/A</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>N/A</u>
<u>none</u>	<u>N/A</u>	<u>N/A</u>

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Spouse
Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>0</u>	\$ <u>0</u>
Are any real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and Telephone)	\$ <u>0</u>	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>0</u>
Food	\$ <u>0</u>	\$ <u>0</u>
Clothing	\$ <u>0</u>	\$ <u>0</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>0</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>0</u>
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>0</u>
Insurance (not deducted from wages or included in Mortgage payments)	\$ <u>0</u>	\$ <u>0</u>
Homeowner's or renter's	\$ <u>0</u>	\$ <u>0</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Other: <u>none</u>	\$ <u>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in Mortgage payments)(specify): <u>none</u>	\$ <u>0</u>	\$ <u>0</u>
Installment payments	\$ <u>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit card (name): <u>none</u>	\$ <u>0</u>	\$ <u>0</u>
Department store (name): <u>none</u>	\$ <u>0</u>	\$ <u>0</u>
Other: <u>none</u>	\$ <u>0</u>	\$ <u>0</u>

Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expenses for operations of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>none</u>	\$ <u>0</u>	\$ <u>0</u>
<b>Total monthly expenses:</b>	\$ <u>0</u>	\$ <u>0</u>

9. Do you expect any major changes to your monthly income or expenses in your assets or liabilities during the next 12 months?

☐ Yes ☒ No

If yes, describe on an attached sheet.

10. Have you paid — or will you be paying — an attorney any money for services in connection with this case, including the completion of this form? ☐ Yes ☒ No

If yes, how much? \$ N/A

If yes, state the attorney's name, address, and telephone number:

N/A  
\_\_\_\_\_  
\_\_\_\_\_

11. Have you paid — or will you be paying — anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form?

☐ Yes ☒ No

If yes, how much? \$ N/A

If yes, state the person's name, address, and telephone number:

N/A  
\_\_\_\_\_  
\_\_\_\_\_

12. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

*I am currently incarcerated and have been since 12/5/00 and therefore have no source of income except money sent to me from family for canteen and other necessities.*

13. State the address of your legal residence.

PCCF, 26 Long Pond Rd.  
Plymouth, MA 02360

Your day/time phone number: ( ) NONE

Your age: 37 Your years of schooling: 9th (GED later on)

[REDACTED]



# Plymouth County Correctional Facility

Account #: 42960

Account Name: GONCALVES, RAUL PEREIRA JR

Account Type: I INMATE CANTEEN ACCOUNTS

SSN: 013-60-9506

Indigent: No

## Account History Report

Post. Date	Post. Time	Type	Trans. #	Ref. #	From/To	Amount	Balance	Booking #	Batch ID
2006/06/12	09:35	CNTN	1794403	93507	OID:100179850-Comisar yPurch-Re	-\$56.38	\$114.06	602028	Purch20060612091434
2006/06/05	13:06	CNTN	1791084	92851	OID:100178245-Comisar yPurch-Re	-\$17.95	\$170.44	602028	Purch20060605124735
2006/05/31	10:13	IPMO	1788757	8135400712	MARIA GONCALVES	\$50.00	\$188.39	602028	MAIL5/31/06
2006/05/22	13:44	CNTN	1784198	91832	OID:100176286-Comisar yPurch-Re	-\$15.93	\$138.39	602028	Purch20060522133041
2006/05/15	13:06	CNTN	1780636	91264	OID:100175008-Comisar yPurch-Re	-\$15.82	\$154.32	602028	Purch20060515124931
2006/05/08	12:57	CNTN	1777015	90741	OID:100174135-Comisar yPurch-Re	-\$14.15	\$170.14	602028	Purch20060508124026
2006/05/01	12:50	CNTN	1773531	90101	OID:100172537-Comisar yPurch-Re	-\$27.64	\$184.29	602028	Purch20060501123451
2006/04/27	10:09	IPMO	1771659	9794284773	MARIA GONSALVES	\$40.00	\$211.93	602028	MAIL4/27/06
2006/04/24	12:43	CNTN	1770123	89731	OID:100172341-Comisar yPurch-Re	-\$9.13	\$171.93	602028	Purch20060424122548
2006/04/18	09:43	CNTN	1766473	89067	OID:100170518-Comisar yPurch-Re	-\$10.72	\$181.06	602028	Purch20060418092614
2006/04/12	10:25	IPMO	1764446	18905	BRISTOL CYT.	\$191.78	\$191.78	602028	MAIL4/12/06